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and the second of the second s	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875						Application or Docket Number			
	CLAIMS AS FILED - PART I (Column 1) (Column 2)			lumn 2)	SMALL	ENTITY	OR	OTHER THAN OR SMALL ENTITY		
	FOR	NUMBER FILED	NUMBE	NUMBER EXTRA		FEE		RATE	FEE	
	BASIC FEE (37 CFR 1.16(a))			]		\$	OR		5770	
	TOTAL CLAIMS (37 CFR 1.16(c))	12minus 20	<u>.</u> . 9	22	x \$ =		OR	× \$ 18 =	396	
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	7 minus 3	. 4	/	x \$=		OR	× \$86 =	344	
•	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))  * If the difference in column 1 is less than zero, enter "0" in column 2.				+ \$=		OR	+ \$=		
					TOTAL		OR	TOTAL	1510	
	CLAIMS AS AMENDED – PART II									
के प्राप्त सुकेशीय के प्राप्त स्वतंत्र स्वतंत्र स्वतंत्र स्वतंत्र स्वतंत्र स्वतंत्र स्वतंत्र स्वतंत्र स्वतंत्र	. (0	Column 1)	(Column 2)	(Column 3)	SMALL E	ENTITY	OR		R THAN ENTITY	
		CLAIMS EMAINING AFTER ÆNDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	Minus	**	=	x \$=		OR	x \$ =		
	☐ Independent (37 CFR 1.16(b))	Minus	***	=	x \$_ =		OR	x \$ =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+ \$=		OR	+5 =			
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	(0	Column 1)	(Column 2)	(Column 3)			1	7000100		
	RI AM	IENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
•	Total * .	Minus	**	=	x \$=		OR	x \$_ =		
	Z Independent * (37 CFR 1.16(b))	Minus	***	=	x \$ =		OR	x \$ =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+ s =		OR	+ \$ =			
				***************************************	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	(Column 1) (Column 2) (Column 3)									
	E RE	CLAIMS EMAINING AFTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total (37 CFR 1.16(c))	. Minus .	**	= .	x \$=		OR	x \$ =	- 122	
	Total (37 CFR 1.16(c))  Independent (37 CFR 1.16(b))	Minus	***	=	x \$_ =		OR	x \$ =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						ľ			
ţ					+ s = TOTAL		OR [	+ § = TOTAL		
. }	<ul> <li>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.</li> </ul>				ADD'L FEE		OR	ADD'L FEE	,	
	** If the "Highest Numb  *** If the "Highest Numb	er Previously Paid For <sup>®</sup> II er Previously Paid For <b>® I</b> N	N THIS SPACE IS	s less than 20, e	nter "20".	t				

"" If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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